

ISSUE SLIP STAMP AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Robert C.	12	10-01-01
O.I.P.E. CLASSIFIER		1117	11/07/01
FORMALITY REVIEW	H.T.	10721	02-05-02
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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67-02
 1-3-02